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**Chronic Disease Committee
Meeting Minutes**

Wednesday, October 17, 2007

11:00am – 12:30

One Ashburton 21st Floor, Room 1
Boston, MA

Council Members Present: Kevin Beagan, Elizabeth Capstick, Kenneth LaBresh, Katharine London.

Meeting called to order at 11:10pm.

Overview of the Committee's responsibilities

The Committee discussed the charge to the Chronic Disease Committee. The Committee is responsible for looking at the process of care and outcomes related to Chronic Disease. The Committee will identify concrete steps to improve screening and management of chronic illnesses in the community; estimate the cost of implementing these steps, the potential savings and the potential for improving the health of the population.

Discussion of opportunities for improvement of Chronic Care.

- Ken LaBresh reported that CMS is developing HEDIS-like measures for its doctor-compare website. CMS is also funding 25 programs across the country to coordinate pay for performance programs across purchaser and payers.
- The Committee discussed the possibility of insurance companies offering rewards and incentives to consumers to reward healthy behaviors, such as Target gift cards. Kevin Beagan said that Division of Insurance has not permitted insurance incentives due to the MA anti-rebate law which prohibits rebating products that do not lead to health benefits. Kevin Beagan asked that the committee look into the pros and cons and identify ways where such a system could possibly serve as a catalyst for change in Chronic Disease Management. Members agreed that there are effective and ineffective ways to set this up. The Committee plans to look at these incentives and identify what should be changed and what should be kept and improved.
- The Committee discussed programs to encourage patient Self Management. Programs to encourage patient self management are becoming increasingly popular in states around the US, particularly in the area of diabetes. MA insurers do not pay for training patients in self management techniques. The Committee recommends that members look at the successes and failures of these programs in moving forward.

- The Committee discussed the shortage of primary care doctors in Massachusetts and the number of visits per person. The shortage of primary care doctors has been a constant concern in health care. Reports show that Massachusetts has more working primary care doctors per capita than almost any other state and more visits per person. The Committee plans to review the reports and these issues moving forward.

Committee Goals

- The Committee discussed the need to identify best practices in the area of Chronic Disease Management. The Committee is interested in looking at the different kinds of Chronic Disease Management programs available in Massachusetts, particularly in disadvantage communities. Identifying what works and what does not will be pivotal in setting concrete principals moving forward.
- The Committee discussed the possibility of the Council's website serving as a conduit to help patients find information on chronic disease self-management. The website could also include a place where consumers can register to receive further information.
- The Committee agreed to focus on the following issues:
 - 1) *Support Consumer Self-Management Programs*
 - Agenda-setting for improvement
 - Education
 - Incentives
 - 2) *Support to Physician Offices*
 - Process redesign
 - IT structure
 - Education
 - Incentives
 - 3) *Community Resources*
 - 4) *Focus on disparities*
 - 5) *Align payment incentives around shared goals*
 - 6) *Investigate legal constraints on providing incentives to consumers.*

Committee Membership

- The Committee recommends that interested parties who know of Chronic Disease Management programs and initiatives make recommendations to the Committee. Committee concluded the meeting by asking members to identify any organizations that they would like to include in the conversation – Medicare's Chronic Disease Management Program, Neighborhood Health Plan- Mass League of Community Health Centers, Mass Health Quality Partners, MassPro, UNA Home Health Care were some of the organizations mentioned. Committee plan to invite these organizations and initiatives to join the Committee in its efforts.

Meeting Adjourned 12:30pm